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## CHAPTER 2

# BECOMING MUM: EXPLORING THE EMERGENCE AND FORMULATION OF A MOTHER'S IDENTITY DURING THE TRANSITION INTO MOTHERHOOD

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### ABSTRACT

*Purpose – The transition into motherhood is a major life course event for most women, and is one that can be fraught with difficulties due to the uncertainty and instability which accompanies it. Previous research has explored what factors interplay within this transition with identity changes being considered a key attribute. By using assemblage theory, this study aims to undertake an innovative approach to conceptualising identity. Assemblage theory permitted an exploration of how an identity comes to be assembled and embodied through a mother's relationality with the social world around her as opposed to merely exploring identity as a static entity of a fixed, organic whole as has predominantly been done previously. Assemblage theory is premised upon understanding processes of becoming as opposed to states of being and as such takes a machinic approach to understanding wholes. Rather than being organic totalities, they are conceptualised as being transient and fluid entities comprising an amalgamation of interchangeable components which collectively stabilise to make up the whole. At times of change, an individual's ties to an identity undergo deterritorialisation, or weaken, as their sense of self and identity readjusts before*

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*then experiencing reterritorialisation once they (re)established their ties to a new identity or role. By conceptualising the mothers as assemblages in this manner, it became possible to understand how the women reconstructed their selves and identities through the situated practices and experiences in their everyday lives as they established ties to their new role as a mother.*

**Methodology/Approach** – *Results are presented from biographical narrative interviews with 10 mothers each at different stages in motherhood. The interviews focussed on inducing uninterrupted narratives detailing the lived experiences of these women as they transitioned into and across motherhood. These interviews highlighted key stages in the transition into motherhood where a woman's identity and sense of self would become destabilised and reformulated as a result of changes in her everyday lived experiences and routines.*

**Findings** – *Transitioning into motherhood proved to be a multifaceted process that comprises numerous stages where the new mothers identities would become unstable and deterritorialise as they faced new routines in their everyday life as they became a mother and settled into the role. Four dominant themes emerged during data analysis; emotional turmoil, the reconstruction of relationships, getting comfortable with their baby as well as rediscovering the self. The women largely experienced emotional turmoil as their identities became deterritorialised and reported that the relationships they held with others around them often changed or broke down entirely. It was not until they became comfortable with their baby and their role as a mother that they were able to rediscover their 'self' beyond simply being a mother. Once they reached this stage in the transition their identity was able to reterritorialise, becoming more stable as a result.*

**Originality/Value** – *This study not only presents an innovative method for conceptualising identity but also demonstrates the value of assemblage theory for conceptualising identity formulation and capturing the fluid and emergent nature of such processes. It demonstrates how assemblage theory can be utilised to further understandings of the multifaceted and ongoing nature of life course transitions. This study sheds light on the potential for assemblage theory to be utilised across a range of sociological topics relating to identity formulation, with such studies having the potential to really broaden the scope of sociological understandings of identity formation and life course transitions.*

**Keywords:** Assemblage theory; motherhood; transition; emergence; first-time mother; social roles; deterritorialisation; reterritorialisation; identity

Becoming a mother is a significant life event for women and is one which represents a period of extensive transformation as a woman's identity and role in life begin to be reconstructed right from the moment she discovers she is pregnant up to and beyond the birth of her child. Due to the profound impact such a transition has on a woman, it is unsurprising that extensive research has been conducted

exploring the phenomena. This existing research spans across a diverse range of fields – spanning from sociology and anthropology to medicine and psychiatry – and explores how a range of multifarious factors influence a new mother's transition into motherhood. This previous research has had an overwhelming focus on exploring how factors influence the transition into motherhood, predominantly overlooking how the transition itself takes place and how the 'mother' identity emerges during the transition and becomes embraced by the individual. Sociological research has certainly explored at length the role of identity within the transition and how it is reformulated and adapted as a mother embraces her newfound identity (Ambrosini & Stanghellini, 2012; Badinter, 1981, 2011; Kleiman, 2011; Price, 1988; Urwin, 2007). While this research has inarguably contributed extensively to understandings of the links between identity and becoming a mother it can be said to be somewhat limited by its relatively static understandings of identity and its formulations. Much of the work conceptualises these identity changes as being a static event that is triggered by the presence of particular factors or events in a woman's life prompting her to adopt a new identity. There is a dominant focus upon understanding what factors influenced this emergence of the mother identity, with this focus constructing the constrictive notion that this new identity is a fully formed, fixed and stable phenomena which has been embodied as opposed to something which is fluid, ephemeral and continually being formulated and reformulated.

This study was explicitly designed to further understandings of the transition into motherhood and the interplay of identity within it by using assemblage theory for the first time within the field to develop a new approach to understanding of the fluid, contingent nature of a mother's identity and how it interplays within transitions into, and across, motherhood. Assemblage theory has become synonymous with work concerned with questions of convergence, transformation and contingency (DeLanda, 2002, 2006a, 2006b; Deleuze & Guattari, 1987; Latour, 1993), with each of these concepts are particularly pertinent to understandings of motherhood. The transition into motherhood represents a time of convergence as a woman must find a way to reformulate and transform her existing identity to incorporate her new identity as a mother. This transformation of the self is entirely contingent upon the occurrence of particular events, such as the discovery of her pregnancy, changes to her daily routines and the birth of her child. These concepts are greatly beneficial for informing explanations of how transitions such as becoming a mother take place. Assemblage thinking is premised on ontogenesis; that is, it focuses on *processes of becoming*, rather than states of *being*. Assemblage theory rejects causal and structural accounts of identity formation in favour of an approach which regards identities and the remaking of selves as emerging from within *the density and texture of things in their particularity; the affects, the technologies, the bodies, the events* (Marcus & Saka, 2006, p. 105). In simpler terms, selves are seen as emerging as a result of the quality of interactions with the phenomena (technologies, people and events) with which the individual interacts and the feelings experienced and meanings developed from these interactions. Assemblage theory ultimately casts an analytical spotlight on the complex, fluid and multifaceted nature of everyday lives, looking at how individuals

reconstruct the self through the situated practices and experiences in their everyday lives. This approach would see the mothering identity as emerging through the assemblage of a bricolage of relationships, interactions and intersubjectivities which can be both expressive (language and practices) and material (environment and resources), and which may have territorialising (strengthening) or deterritorialising (weakening) effects in building and consolidating relationships between self and others, culture and place and past and future lives. At such key points, the identity of the individual stabilises and destabilises as it is re/formulated as the individual becomes a mother for the first time. Understanding the contingency and mutability of these processes enables a deeper understanding of the uncertainties and fractured trajectories occurring during the transition to motherhood.

### ASSEMBLAGE AND THE CONCEPT OF THE MOTHERING IDENTITY

Assemblage theory as a theoretical framework is positioned well for linking with and informing understandings of the concept of the mothering identity due to its emphasis on the fluid and contingent nature of wholes. In relation to the mother identity this notion of fluidity refers to the manner in which it is shaped through our interactions with the social world around us and the contingent nature of identity refers to emergence of particular identities depending upon the occurrence of specific events and/or environments. Such an approach to the concept of the mothering identity permits an exploration of how identity interplays within transitions into, and across, motherhood as it undergoes continual reformulation.

Previous research predominantly focuses on exploring the initial transition into motherhood and how a woman adapts to her new role to cement her identity as a mother (Miller, 2007; Stern, 1998; Urwin, 2007). This extensive focus on the initial transition sees researchers largely disregarding the transient nature of this newfound identity and failing to acknowledge that this identity will inevitably come to be reformulated again due to the ever-changing nature of a mother's role across motherhood as her child grows and transitions from childhood into adulthood. This leads to the conceptualisation of identity formation for new mothers as being a somewhat static event which is triggered by the presence of particular factors or events such as discovering a pregnancy and giving birth to a child which prompts her to adopt a new identity (Freund, 2008; Hollway, 2015; Laney, Carruthers, Hall, & Anderson, 2014; Miller, 2007). There is a dominant theme in the current literature that denotes the mother identity as something which becomes fixed and stable once a woman is able to adapt to and embody the identity of a mother. An alternative approach would instead represent the mother identity as one that is fluid, ephemeral and continually being formulated and reformulated. Deleuze and Guattari's (1987) concept of assemblage is useful for such an alternative approach for furthering understandings of the transition into motherhood and the interplay of identity. The Deleuzian–Guattarian term assemblage is derived from the French term 'agencement' and is defined as a *whole characterised by relations of exteriority* (DeLanda, 2006a, p. 10), which means that

properties of each component within the assemblage are not dependent on their role within the assemblage. Instead, these components are able to retain some level of independence and can, therefore, be ‘unplugged’ from one assemblage and plugged into another where their role may differ. Where components and wholes are defined by relations of interiority, they become totalities irreducible to their parts as the properties of each component are defined by their role and functionality within one specific assemblage. Should they be unplugged from the assemblage, they would cease to be as they are specifically defined by their role within the assemblage. Thomas Nail uses the analogy of the human body and its organs to illustrate this concept of totalities and irreducibility:

Each organ performs a function in the service of reproducing its relations with the other parts and ultimately the harmony of the whole organism. A heart separated from a body does not survive as a “heart,” since the function of a heart is to circulate blood through a body. Similarly, the organism does not survive without a heart, since it is the nature of the organism to have a heart. (Nail, 2017)

This concept of wholes defined by relations of exteriority relates well to the aforementioned alternative approach to conceptualising the mother identity as it allows both the individual and their identity to be conceptualised as an assemblage of interacting components which together form the whole entity or individual. Utilising these concepts of components, fluidity and interchangeability deepens understandings of identity formation as they are able to illustrate how phenomena such as changing roles will become components within the assemblage which inform new understandings of the self and lead to a reformulation of a new mother’s identity. The use of assemblage thinking to inform understandings of the transition into motherhood and the interplay of identity is beneficial as it permits a dissemination of how differing components, or parts, come together transiently to prompt the emergence of a new identity and assemblage. The discovery of a pregnancy for instance immediately destabilises (or deterritorialises) a woman’s assemblage as the foetus becomes a new component within it, which weakens the bonds she holds to her existing identity. The existence of the foetus within her body combined with her discovery of her pregnancy initiates deterritorialisation processes as it prompts behavioural changes to continually take place throughout her pregnancy and following the birth of her child. Her pregnancy represents a time of instability as her sense of self and identity undergo profound changes as a result of the child she is carrying and the changes this prompts within her everyday life as she prepares for the arrival of her child and the new role of being a mother. These periods of instability represent points where an extensively reformulation of identity is taking place through ongoing points of territorialisation, deterritorialisation and reterritorialisation. When the assemblage is territorialised, the components are internally homogenous and have a sense of unity and stability through their interactions. When the assemblage becomes deterritorialised, often in the face of changes in the everyday lives of these women, this homogeneity is lost as the interactions between existing components change or new components are introduced which destabilises the assemblage and forces it to change. Reterritorialisation occurs once the internal

homogeneity of the assemblage is restored, often due to the woman adapting to the changes which prompted the initial destabilisation to establish her newfound sense of self and identity.

Assemblage theory when applied to the mother identity is predicated on two key assumptions with the first being that there is no necessary or natural form of an entity and the second being that a mothering identity emerges from a bricolage of relationships, interactions and intersubjectivities. This first assumption that there is no natural or necessary form of an entity is important in understanding the perpetual transitory state of an individual's identity as it explains how the boundaries of an entity, or in this case the individual, are constituted through historical and social processes. As the individual embraces new roles and engages in new experiences and situated practices in their life, such as becoming a mother, the boundaries of the self are extended to accommodate new components within the assemblage. This first assumption that the boundaries of an entity are extendable explains well the multifaceted nature of identity formation as it requires a 'stretching' or extension of the self (Bacevic, 2018). This endless potential to extend and stretch to accommodate new roles in life such as motherhood explains how the mothering identity never truly becomes a fixed state. Instead, it remains in a continuous transitory state throughout motherhood as it is endlessly reformulated as a woman reaches new stages of motherhood, which prompt changes in her role as a mother and thus to her identity. The second assumption clarifies how the mothering identity emerges from relations between multiple elements which can be material, emotional and temporal. A bricolage of relationships links with the emergence of a new identity for instance as mothers establish a diverse range of relationships with new people and groups across the transition into motherhood and also reformulate some existing ones. These changing and expanding relationships can inform both a woman's perceptions of her identity and her sense of self. Further to this intersubjectivities concerning the specificities of roles such as that of being a mother underpin shared understandings of what it means to be a mother. To put this, in simpler terms, intersubjectivities can take the form the understandings women have of their own bodily experiences of motherhood and their awareness others within the same role will share parallel experiences. These intersubjectivities inform understandings of what it means to be a mother and define specific situated practices of mothering. The multitude of relations between such elements emphatically demonstrates the deeply complex and multifaceted nature of the process of becoming a mother as they all interplay in the emergence of the mother identity.

Using an ontogenetic framework underpinned by assemblage theory enables a focus on emergence and 'becoming', allowing for an exploration of how a new mother's identity is assembled and produced through a complex array of interactional and relational practices (Campbell, 2013; Marcus & Saka, 2006). Assemblage thinking enables identity categories (such as being a mother, or wife) to be conceptualised as 'events, actions and encounters between bodies' as opposed to being 'simply entities and attributes of the subject' (Puar, 2012). Assemblages are intrinsically varied and fluid, ever-changing with no constant, which is reflected in the concept that identities themselves are events; fleeting and

ever-changing – a concept which lends itself well to exploring how a new identity emerges during an individual's transition into motherhood. While assemblage theory has not been used to understand small scale events such as the transition to motherhood its application on a larger scale within other fields of social sciences highlights both its value and potential (Campbell, 2013; McFarlane, 2009; Muminovic, 2015).

This study draws on biographical life story interviews with a sample of mothers at a range of points in motherhood. The findings are based upon 10 interviews with participants ranging in age from 19–31 years, all of whom had at least one child. In the following section, the existing literature on transitions into motherhood is reviewed before moving on to a discussion of the data and methods used in the research. After highlighting key themes in the findings, recommendations are made for future research to adapt a more reflexive, fluid understanding of identity and its formulation.

## LITERATURE REVIEW

Research exploring the transition into motherhood has been conducted under a range of diverse perspectives. Medical perspectives have explored physical complications during pregnancy, childbirth and postnatally, such as gestational diabetes, birth defects and breastfeeding issues (Barbosa, Chaud, & Gomes, 2008; Rumbold & Crowther, 2002; Ryan & Runswick-Cole, 2008). Psychology- and psychiatry-based research, on the other hand, focuses more so on exploring the emotional impact of becoming a mother on a woman's psyche, with much of the research within these perspectives studying women who suffer from Post-Natal Depression (PND; Hannan, 2015; Homewood, Tweed, Cree, & Crossley, 2009). Social-science-based research focuses more so on how motherhood is a diverse phenomenon across differing cultures (Oakley, 1980), with feminist research in particular exploring how a woman's role as a mother is influenced by the patriarchy and impacts not only her power position but also her place in the home and her place in wider society (Hollway, 2016). Existing research highlights the importance of factors such as emotions, having an attainable new identity as a mother and navigating the emotional crisis that inevitably comes alongside motherhood.

### *Attaining the Mother Identity*

Stern, Bruschweiler-Stern, & Freeland (1998) suggest that a woman gives birth to not only a child, but also to a new identity and the sense of being a mother. The physically changing body is believed to be a visual sign of the changes in her psyche taking place as her identity begins to transition in the early stages of pregnancy. These visual changes allow a mother to begin to relinquish her previous individual identity and sense of self to allow for her maternal identity to begin to emerge and stabilise. This new identity is believed to develop and stabilise through a mother imagining her future self with her baby as she begins to assign roles, mannerisms and behaviours to herself, the father of her child and to her baby. These expectations for the future which stem from this imagined life

often resonate with societal expectations of idyllic mothering, which can lead to difficulties when the reality of motherhood falls short of expectations (Maushart, 1999; Stern et al., 1998). Stern later developed the concept of the 'motherhood constellation', a construct which represents the transition women undergo as they enter motherhood (Stern, 1998). The constellation has four main themes: life growth, primary relationships, support matrix and identity reorganisation, with identity reorganisation being the point where a mother needs to 'transform and reorganise her self-identity' (Stern, 1998, p. 180). This aspect of the motherhood constellation suggests a woman needs to shift her self-identity if she is to transition into motherhood successfully. This shift will include processing her transitioning from her roles as a daughter to a mother and a wife to a parent and must occur if a woman is to be able to undertake the other three themes of the constellation successfully.

The process of becoming a mother has been found to be a gradual one which entails the process of making sense of their newfound identity as a mother. The transition into motherhood is certainly aided when the baby arrives and the woman begins to engage in the practical aspects of mothering. There are notable differences between simply doing the work of a mother and actually feeling like a mother, with her suggesting that giving birth is often not this magical moment where a woman suddenly begins to identify as a mother once her baby has arrived (Miller, 2007). Miller conceptualises selves as being complex and fluid, constantly changing across the life course and that it is only through physically beginning to mother a child that women are able to truly begin to identify with the mother identity and incorporate it into their self-identity. Becoming a mother often leads to the generation of new attributes in women both personally and relationally, which arguably would not be developed had they not become mothers (Laney et al., 2014). Given that these attributes are seen to enable a women to exude more compassion and empathy towards others and often made them more emotionally available to not only their baby, but also others, motherhood could be considered to be personally expansive for the self.

Identity adaptation and reformulation is believed to play a central role in the transition into motherhood, with the embodiment of the new mother identity at times being a difficult and traumatic experience for some women. Many women report feeling a loss of identity as they must sacrifice many aspects of the lives they have built for themselves following the birth of their first child (Arnold-Baker, 2014; Price, 1988). New mothers lose not only a proportion of their income as they become unable to work, but also adult company as motherhood forces a withdrawal from the public sphere. This reinforces the loss of elements of their self in terms of their inner space and personal freedoms as the mothers are no longer able to do as they wish or focus solely on their self. Such losses can inarguably be considered an inevitable ramification of adapting to the 'extraordinary demands' that major life events and transitions place on us as individuals (Kleiman, 2011). These losses are considered a necessary part of realising that our expectations differ from the reality and often contribute to the 'existential loneliness' that occurs in the first months following the birth of a child as a mother grapples to adjust to her new life and identity while also processing the loss of her previous one (Urwin, 2007). The losses must be both processed and accepted if the individual is to grow and move

forward in their life (Viorst, 1998). This loss of the self can lead to and further propagate experiences of emotional turmoil as the entry to motherhood presents extensive conflict in the management of a woman's existing lifestyle and identity and the new lifestyles and identity which come with being a mother. Feeling pressure to simultaneously balance the responsibilities working, mothering and domestic labour for instance places undue stress on women which should they struggle to manage can lead them to experience feelings of failure and unworthiness (Choi, Henshaw, Baker, & Tree, 2005; Oakley, 1987). Similar emotional turmoil can also arise from a lack of preparedness for and unrealistic expectations of motherhood with many women struggling to process the reality of what it truly is to be a mother which inevitably leads to difficulties in embodying their new role as a mother. Those who struggle to adapt to their role as a mother often report experiencing extensive feelings of shame, inadequacy and may suffer from postnatal depression (Homewood et al., 2009). These struggles cause inevitable stability in a woman's identity and sense of self inevitably as she transitions into motherhood and moves towards attaining her new identity of a mother. This stability inarguably triggers intense periods of turmoil which prompt what can be referred to as an emotional crisis of motherhood which is ongoing until they reach a point where they can both reconcile their emotional state and embody their new role as a mother.

#### *The Emotional Crisis of Motherhood*

For many women, the point in their lives where they enter motherhood can be a 'shock to the system' and incredibly overwhelming as their new responsibilities and lack of independence become immediately apparent. Many new mothers tend to report an eclectic range of emotions following the arrival of their baby ranging from shock and unpreparedness (Figs, 2008; Freund, 2008; Read, Crockett, & Mason, 2012), a loss of control (Mercer, 2004; Miller, 2007) and an overwhelming sense of responsibility (Stadlen, 2004; Stern et al., 1998). Experiencing a sense of shock and unpreparedness is certainly something reported by many of the women in contemporary motherhood research, with many mothers using the words 'shock' and 'shocked' in their descriptions of their experience as a mother (Read et al., 2012). There tends to be consensus that unrealistic expectations of motherhood are somewhat responsible for women feeling overwhelmed and shocked, with such unrealistic expectations often making it difficult for a mother to make sense of her experiences of motherhood (Lazarus & Rossouw, 2015). Reports of feeling a loss of control can arguably be considered a standard emotional response given the extent of how much is occurring and changing in their lives simultaneously (Figs, 2008). Women described feeling the need to not only 'maintain "control" over their birth experiences' but they often also felt 'the need to act in "acceptable" and controlled ways during birth' (Miller, 2007, p. 349). A woman's 'maternal identity status' arguably depends upon her maintaining 'functional control' of her body. When she loses this control, as can often happen during pregnancy and childbirth, her self-esteem will often lower and she will experience anxiety over her perceived risk of role failure (Mercer, 2004, p. 227).

Once a woman regains her sense of control, her self-esteem would improve and she would generally feel more competent when it comes to caring for her baby.

The term 'crisis' is well-placed to describe the complex emotional and psychological responses women commonly have when they become a mother, one which requires extensive psychological adaption and interpersonal reorganisation (Brockington, 1996). Women regularly report experiencing feelings of anxiety and worry during the transition into motherhood with Brockington suggesting some mothers – particularly first-time ones – may develop severe anxiety during this time as well as postnatal depression. Some suggest that such feelings can be caused by a lack of preparedness, with Miller's research finding that mothers felt antenatal classes offered no real support when it came to preparing them for the reality of what being a mother would actually be like (Miller, 2007). Stadlen suggests that the best form of preparation, would be for a woman to be open minded by expecting the unexpected (Stadlen, 2004). Doing this would prevent her from developing unrealistic expectations of motherhood, which would arguably make the transition easier to negotiate. While engaging such a mind-set works in theory, in practice it is unlikely to be an easily achievable feat. Mothers often presented a front to the world that they were 'coping', even when they often felt they were not. This desire to present such a front seemingly stems from feelings of anxiety and worry should their experiences not be in line with the dominant ideologies of motherhood. though once a mother has had the time to make sense of her experience of motherhood, these feelings often dissipate and her confidence in her own ability to care for her child would increase (Miller, 2007). Those women who experience longer postpartal hospitalisation often were more confident in their own ability to cope with motherhood (Mercer, 2004, p. 228) with this increased confidence potentially stemming from the increased support these mothers will have received when it came to caring for their newborn. Offering postpartum support to women in the first few days of motherhood could be greatly beneficial in not only raising a new mother's self-confidence but also in reducing her feelings of anxiety and worry.

## DATA AND METHODS

The study draws on data gathered from a number of in-depth biographical life story interviews conducted with 10 White British, heterosexual mothers from the North East of England who were aged between 19 and 31 years. Each of the women were from traditionally working class backgrounds and had attained differing levels of education with one participant had a foundation degree and the remainder of the sample had NVQ qualifications at Level 3 or below. The sample included women who were at a range of differing stages of motherhood some of whom had followed the 'normal' path to becoming a mother and others who had taken a more unconventional route into motherhood. Three of the women were young teenage parents and one other became a mother through a fostering arrangement. Exploring the experiences of women who undertook both conventional and unconventional pathways into motherhood, this

research acknowledges the diverse nature of the transition into motherhood. Further to this, it was possible to explore how the experiences of these women could be comparable despite such seemingly fundamental differences. Each of the participants was recruited through existing social networks, social media and snowball sampling. The study was designed to resonate with assemblage thinking and the desire to develop an understanding of the construction of selves, identities and social worlds. It was, therefore, imperative that the study undertake a qualitative, interpretivist approach to both the data collection and analysis.

Given that the interviews aimed to elicit free flowing narrative, the study used the Biographical Narrative Interviewing Method (BNIM) as guidance for developing a single question aimed at inducing narrative (SQUIN). Using such a technique has proven successful in prompting free flowing narrative which minimises the need for input from and influence of the researcher over participant responses (Fenge & Jones, 2012). Following the SQUIN, all of the participants proceeded to talk freely without any interruption for between 35 and 95 minutes. The interviews were recorded and notes were taken throughout. Once the participant concluded their narrative, further probing questions were asked regarding particular areas of interest from what they shared during the interview, which enabled the data to be given further depth and context where relevant (Muylaert, Sarubbi, Gallo, & Neto, 2014).

Data analysis was not an isolated stage conducted only after all of the data were collected, but a rather reflexive, iterative process which saw the data continually revisited, re-explored and re-evaluated to allow new concepts and themes to emerge and be further developed (Bryman, 2012). Using assemblage thinking to conceptualise the formation of the women's identity, the analysis focussed upon conceptualising the individual themselves as a whole, and the varying roles they embody in their day-to-day lives and subjective lived experiences became the components which when amalgamated form and shape their identity. These parts are removable, interchangeable and fluid with their interactions within the assemblage varying based upon the interactions of other components which allows for an individual's identity to be continually reformulated as an individual transitions through stages. Initially, an individual will experience deterritorialisation – where their ties to a particular identity or role are weakened – before experiencing reterritorialisation – where the individual (re)establishes ties to another identity or role. Initial analysis followed open coding techniques by looking for any notable categories in each transcript, with there being a particular focus on identifying points of deterritorialisation and reterritorialisation (Pandit, 1996). A secondary analysis was then conducted using axial coding techniques to compare each interview transcript to identify whether there were any connections between the data (Pandit, 1996).

Four dominant themes were identified within the interview transcripts: emotional turmoil, reconstructing relationships, getting comfortable with the baby and, most pertinently, rediscovering the self. Careful examination of these themes highlighted how each one linked to instances of deterritorialisation – where the women experienced a destabilisation of their identity and sense of self – prompted

through changes in their everyday lives. The overall outline of thematic findings which emerged from each of the women's interviews was continually revisited and revised throughout the transcription process in order to underpin the development of strong thematic categories. This was necessary to ensure that they were able to be clearly linked to informing understandings of how the mother as an assemblage emerges from the amalgamation of a diverse range of contingent, fluid and ephemeral components and subcomponents.

## FINDINGS

The data analysis identified four dominant themes present in all of the participants' interview transcripts: emotional turmoil, reconstructing relationships, getting comfortable with the baby and rediscovering the self. Each of these themes was then used to inform the conceptualisation of the mother as an assemblage. The first theme of emotional turmoil highlighted how the presence of simultaneous conflicting emotions for the women (such as shock and joy) made it difficult for them to process their emotional state throughout their transition into motherhood. Reconstructing relationships unpacks the extensive changes which occurred in the relationships all of the women had with their partner, friends and mother during pregnancy and following the arrival of their baby as they transitioned into motherhood. Getting comfortable with the baby focuses on the women adapting to their new role as a mother and disseminating what underpinned this adaptation and 'settling'. The fourth and final theme highlighted how each of the women's transitions into motherhood incorporated a rediscovery of the self, following the initial stages of motherhood. This theme, in particular, highlighted the lifestyle changes which followed this rediscovery and how they impacted upon and changed the everyday lives and routines of the women once they adapted to and embodied their new identity as a mother. Each of these four themes linked well with assemblage concepts as they each involved clearly identifiable periods of instability which led to deterritorialisation, which were later followed by periods of stability and reterritorialisation. This reterritorialisation occurred once the women were able to reconcile their conflicting emotional state and could process and adapt to not only the changes to their relationships with family and friends but also their new role and identity as a mother.

### *Emotional Turmoil*

During their interviews, each of the women shared that they had experienced an extensive range of emotions since becoming pregnant, ranging from shock to joy and guilt to pride. Shock was a commonly cited emotion – particularly in the initial stages where the women discovered their pregnancies:

Lucy (31): When I found out I was pregnant I was absolutely devastated, like devastated, to the point where I thought my life was over. I was only 21 and it just came as such a shock. I know it must sound really bad because you're supposed to be dead happy when you find out but I just genuinely wasn't ready for it.

Louise (27): I found out the same day I'd been to the doctors to get the implant in. He asked if I was pregnant or could be and I said no, but in the back of my head I doubted myself. Something inside of me was just telling me to test. I didn't have any morning sickness or any signs or anything. I guess I did the test more to prove myself wrong, or right depending on how you look at it. My head said I wasn't but my gut was telling me I was. When the test came back positive, I almost died from the shock of it.

Claire (21): I remember being sat in the toilets at school with a pregnancy test. I was only 16 which is quite sad really. I found out just before my lesson started so didn't have time to for it to actually sink in. I just saw it was positive. I was absolutely gobsmacked and honestly absolutely terrified of what my family were going to say.

Kate, who is 19, explained that her pregnancy at sixteen had been unplanned and that she had not shared with those she was with that she was doing a test:

So I had bought a pregnancy test. It was just me, my friend and my partner at the time and I did it secretly, neither of them knew I was doing the test. It was totally positive. I ran out and sat in the car and just cried and cried. Even though I was doing the test, I hadn't expected it to actually come up positive. I thought I was just being paranoid and silly. It was a total shock to the system.

She had not expected to see a positive test which made the reality of her pregnancy incredibly difficult for her to process. Her instinct to flee the situation in response to the shock can be linked to a simultaneous feeling of a loss of control prompting a stress response due to her being unable to process her immediate situation. In the immediate situation, Kate chose to process her predicament alone rather than going to her partner and friend to share her news as she later shared that she knew her pregnancy would not be well received. Kate struggled to process numerous emotions in this one moment as she cycled through shock, fear and guilt for becoming pregnant at such a young age. Her parents were not supportive of Kate's pregnancy and were unsupportive throughout which deeply affected Kate's relationship with both of her parents which became incredibly strained as a result. This was particularly difficult for Kate to emotionally process in addition to having to process the shock of being pregnant as she had previously had a strong relationship with both, her mum and her dad, and found it particularly difficult to have to do without their support.

Joanne, who is 25, had been actively trying for a baby with her partner for several years; however, they had suffered several miscarriages during this time and had, therefore, decided to delay their attempts. When telling of the moment in which she discovered she was pregnant, Joanne spoke about how she instinctively knew she was pregnant before a test confirmed it:

One day I just had a feeling, so when I woke up I took a test and it was positive. I was shocked. So shocked that I came downstairs and had to ask my partner if it was actually positive. I was so excited but still had to go to work. By the time I got there, even though I was still really excited, the panic set in because all I could think about was what happened last time. I had to go home because I was so anxious and just needed to process everything. I was so scared thinking about what I would have to go through if I lost the baby.

Joanne experienced a rapid cycling of emotions in the immediate hours following the discovery of her pregnancy. Despite her intuition telling her that she

was pregnant and prompting her to do a pregnancy test, the confirmation of this still deeply shocked her. Joanne described how she and her partner had previously stopped trying due to difficulties conceiving and told how she felt a sense of irony that she had become pregnant at the point where she had given up hope. The manifestation of these conflicted emotions led to the occurrence of maladaptive emotional processing as Joanne was unable to adequately process the conflicting emotions she was experiencing. These contradictory emotions further conflicted with Joanne's expectations of how she believed she should be behaving and responding to the news of her pregnancy as she believed she should have been experiencing only joy and happiness and not panic and fear.

Faye, who is 27, reported a similar cycling of emotions to Joanne in the moments leading up to and immediately following the discovery of her pregnancy:

I was totally on my own when I found out. I sat across from the test for ages before I got the balls to just go and look at it. When I saw it was positive my heart just dropped. I sat on the floor for so long with the test in my hand just thinking. It was terrifying but exciting at the same time because I didn't have a clue what I was going to do but I knew one way or another I was going to have this tiny little person to love who would love me back just as much.

Faye detailed how her living situation at that point in her life was precarious, with her living in a homeless hostel and having very little contact with, or support from family. This disconnection from her family provoked conflicting emotions of fear and excitement as she not only felt a great sense of fear concerning how she would manage as a mother without support but also excited to have a baby who she would love her unconditionally. Like Joanne, Faye also experienced maladaptive emotional processing as she struggled to process the simultaneous contradictory emotions of shock, fear and excitement in the immediate future. As her pregnancy progressed and Faye was about to visualise herself as a mother with a healthy and fulfilling relationship with her child, she was able to begin to resolve the initial fear and apprehension that she felt in the early stages.

Charlotte, who is 29, was another who explicitly described experiencing shock immediately following the discovery of her pregnancy:

I was expecting it to come back negative because I was on the contraceptive pill. I was so shocked when the result came back positive that I honestly just didn't believe it. I did a few more tests and it started to sink in but I just couldn't believe it. I hadn't missed any pills or anything, I was always so careful. I ended up getting a couple of those tests that tell you how many weeks because I figured they would be more accurate and they ended up being positive too. I was honestly just in a state of shock.

Charlotte was prompted to take a pregnancy test by a colleague at work as she had been feeling poorly. She had not remotely considered the notion that she may be pregnant, and instead took the test to satiate her colleague. The positive result was incredibly difficult for Charlotte to process and prompted, in her words, a 'state of shock' and difficulties in processing the reality of the situation. Charlotte described how it was not until she was in bed that evening that she was able to tell her partner that she was pregnant:

I just wasn't ready for it, I couldn't process it and figured if I couldn't, how was he supposed too? I didn't want to tell him. I didn't know how he would take it. I didn't even know what I wanted to do about the whole situation so wasn't sure if I should even tell him. I couldn't not when it came down to it though, because it changed everything and he would have hated me if he knew I'd kept it from him. When we got into bed that night, I just came out with it. Telling him honestly made it feel a bit more real for me. He was as shocked as I was.

Charlotte experienced great apprehension when it came to telling her partner about her pregnancy as she herself was struggling to process the news and felt he would experience the same difficulties. She described how the discovery of her pregnancy changed everything in terms of their relationship and later in the interview clarified this was due to there being a baby to consider now. Charlotte described how telling her partner made her immediate situation feel more real in the sense that it forced her address her feelings of denial as she discussed how to manage the situation with her partner. Charlotte was not the only mother within the sample who described these feelings of apprehension when it came to informing their closest friends and family about their pregnancy, with many being concerned about receiving negative reactions. These feelings of anxiety can be attributed to the fact that their discovery of their pregnancy was not a conventionally happy moment as it is often portrayed to be which prompted concerns that those around them would react in a similar manner to the way they themselves did, with shock and apprehension.

Experiencing shock when learning of a pregnancy is to be expected given that a women's reality immediately becomes destabilised as the life they were accustomed to living immediately changed in light of their discovery. Regardless of their ability to process the fact that they are pregnant, their identity immediately changes as they register that a physical change in them means they are no longer responsible only for themselves. It is arguably at this primary stage of a mother's transition into motherhood that her identity becomes destabilised and begins to deterritorialise as her ties to the culture and space to which she is familiar begin to weaken. This moment essentially marks the point where the life and routines to which she is accustomed must give way to the new central focus in her life, her unborn child, which leaves her facing the unknown. The reality of this change is so profound that it is unsurprising that women experience shock as they attempt to process how different their life becomes.

All the women in this research reported experiencing feelings of fear and apprehension both during their pregnancy and immediately following the birth of their child. This fear often centred on not knowing what the future held for them and how they would adapt to the physical practices of being a mother once their child had arrived. Lucy described her difficulties in being able to visualise herself with a child:

I was really scared towards the end though because it kind of dawned on me that I was going to have a baby at the end of this. I didn't believe for one second that I was going to be a mam, it just didn't seem to compute that I was going to have a baby.

This inability to visualise herself at the end of her pregnancy with a child is somewhat symbolic of her detachment from the identity of a mother. She was unable to envisage herself as a mother and how that role would change

her everyday life, which caused her to be unable to see herself as embodying it going forward. This detachment provoked feelings of self-doubt for Lucy as she doubted her own capability to be a mother. Lucy went on to have a complicated birth with her son and described how these fears became a reality as feelings of self-doubt and inadequacy in the first days following her son's birth impaired her ability to bond with her son. Lucy interestingly described being concerned about her failure to 'instantly bond' with her son as soon as they are born as mothers are led to believe will happen. Despite highlighting this, however, Lucy did go on to describe such an experience, albeit a delayed one:

I bonded with him very quickly, but it wasn't that instant bond that everyone tells you that you'll have. It wasn't instant. I was very scared of him and thought I would hurt him and questioned whether I could even love him the way I was supposed to. I think it was the second day that I was in hospital and all the visitors had left when the nurse came in and lay him on my chest for us to have some skin to skin contact and some bonding time. They put him on me and I looked at him and he just looked right back into my eyes and it was that moment where all of a sudden I thought there was just no way I could ever love anyone or anything that much. That is how I explain it to other people who are having babies, something will just happen and you will just know that everything you do now is for this baby.

Jessica described a different kind of fear which centred more around her immediate situation when she went into labour:

My waters broke at home and I went into hospital and cried because I was so scared. I had no idea what was going to happen and it was just awful, traumatic and painful. I knew it would hurt but nothing could have prepared me for how much pain I was in. On top of that the staff were horrible and I was just so young. I was terrified. I felt like nobody was helping me.

The reality of giving birth and the pain which comes with it was difficult for Jessica to process. She described how despite attending antenatal classes to prepare for the birth and talking to others about it the reality of the experience was entirely devoid from anything she had envisaged. Her expectations did not align with the reality of the situation, an issue which research has consistently been found to cause issues for a new mother adapting to parenthood. Four of the women had complicated pregnancies and births which were fraught with issues that they had not anticipated and were deeply difficult for them to process. Charlotte, who is 26, suffered from appendicitis during her pregnancy which had to be operated upon:

They didn't want to operate because of the risk to the baby, so gave me medication to try and reduce the inflammation on my appendix. Operating could cause preterm labour or miscarriage. The drugs didn't work though, so I had to have the operation. That was a really scary time. It's hard to explain that fear though... for the first time, I was scared about losing the baby.

The operation and reality of the risks which faced both herself and her unborn child was a very traumatic experience for Charlotte and caused her to realise that her pregnancy was not going to be complication-free, as she had expected due to her perceptions that pregnancy was a happy, enjoyable experience which ended with the safe arrival of a healthy baby. Like many other mothers, Charlotte had not envisaged there being any issues and the occurrence of these produced a host of emotions which conflicted with her perceptions of pregnancy and how

the experience of pregnancy should be. While each of the women all describe experiencing some level of fear over the future, they all reference different kinds of futures. Lucy's fear is situated around the reality that having a child will permanently change her life; Jessica's fear pertained more to her concerns surround her immediate future at that point, with her fears stemming from the pain she was experiencing and feeling unsupported. Charlotte's fear was rooted in her anxiety of losing her baby. Despite each woman expressing and experiencing fear and anxiety at some point, the root of each woman's fear was notably different. The variation in their experience illustrates well how the transition into motherhood differs widely for women, with each woman having their own unique experience causing them to construct meaning at different points of their transition. This meant that while they shared similar emotions, their experiences of them differed widely.

The women all consistently reported feeling guilty for a range of reasons, but the guilt predominantly stemmed for each woman's own perceptions that she was in some way failing at being a mother due to difficulties in adapting to her role, or efforts to continue to do things solely for herself. Joanne for instance shared how having a difficult birth and a blood transfusion left her poorly and struggling to physically care for her daughter. Despite being ill, Joanne told how she continued to attempt to breastfeed as she felt guilty for not doing so:

I just wanted to stop feeling guilty. All I did was feel guilty all the time, I thought everyone just thought I was lazy and I honestly felt pressured to do it by the midwives that I had seen. I feel like I just couldn't bond with her because everyone else was looking after her for me. I think that I sort of lost myself at that point to be honest. I was so tired all the time and I was just consumed with guilt.

Like Joanne, several of the other women described issues with guilt when she began to do activities that she deemed as solely for herself:

Lucy: I was massively relieved that he was in school because I felt like I didn't need to be Mam for those few hours and it was just so refreshing. I even started going to the gym again and doing stuff for the first time in years and I did feel really guilty about that [...] It was like I wasn't a person anymore, I just wasn't important. I did try not to feel guilty but it is just so ingrained into you in a way because you are expected to sacrifice everything for your kids, every part of you.

Faye: I went out for dinner with my friends for the first time when she was about three months old and I just felt so bad. The way people asked where she was just made me feel awful and like they were all judging me for leaving her. I only went for dinner with my friends at the end of the day but I just felt like I should have been with her the whole time.

Claire: I struggled in the first few months. I was just alone with a baby all the time and as bad as it is, I was going crazy. I went back to work when she was six months old. It was just a bar job, so nothing major but it gave me some time for myself even though I was working. I felt guilty for enjoying it, but I needed something for me. It was good to see my work friends again and just be Claire.

For each of these women, these feelings of guilt were difficult for them to process as they all associated this guilt with their attachment to their previous lifestyles and the desires to indulge their own needs which they saw as being secondary to their children's.

All the women within the sample found they experienced a range of emotions throughout their pregnancy and in the early stages of motherhood. These were often 'negative' feelings such as fear, guilt and shock. It took the women time to reconcile their feelings with their new role in life, and once they began to feel comfortable, they were able to process and address these feelings more effectively.

### *Reconstructing Relationships*

All the women who took part in the research discussed changes in their relationships with their partner, friends and mother. Of the 10 mothers interviewed, 6 of them experienced relationship breakdown with the father of their baby. Several of the women told how their partners struggled to adapt to becoming a father. Louise described how despite her everyday life changing following the birth of her baby, her partner's did not. He was able to maintain his post baby identity and lifestyle which Louise suggested ultimately led to the breakdown of her relationship:

My partner wasn't a hands-on Dad. I did the night feeds, the nappy changes etc. David was just there. So when he left, I was doing it all myself anyway, so it didn't really matter. The relationship between us changed because we had someone to look after but I was the only one actually looking after him. It was my life that changed, because I couldn't just go out with my friends when I wanted to, but he still did... a lot.

Jessica and Claire both similarly describe such issues arising from their partners' inability to adapt to their new circumstances:

Jessica: I absolutely loved being pregnant... but my partner didn't really like it. He tried to find any opportunity to go out and not spend time with me. Our relationship broke down a hell of a lot. We ended up splitting up two weeks before the baby was born, which was horrendous.

Claire: I ended up doing everything myself. He just didn't want to be a dad and basically just left me to get on with it by myself. He just did his own thing every weekend like nothing had changed for him. When it came down to it, I grew up and stepped up and he just didn't. We ended up splitting up before the baby was a couple of months old.

Emily, who is 25, undertook a more unconventional pathway into motherhood in comparison to the other women as she became a mother through the fostering of family members under a guardianship. While this unconventional path into motherhood meant that Emily did not experience the transition into motherhood in the same manner as the other participants, she did describe experiencing similar periods of deterritorialisation as following the two children coming to reside with her. Further to this, during her interview, Emily's descriptions of her experiences following her new role as a mother resonated with those of the other women within the sample. Emily specifically described experiencing extensive difficulties within her relationships and friendships once she was awarded guardianship of the two children:

When I got the boys everyone kind of dispersed. I couldn't go for a coffee or go out for drinks at the drop of a hat. People couldn't just pop in because of the social services involvement. A big part of me wasn't me anymore when those people left but now I see it as if those people didn't want to be in my life, then they left it for the better.

The majority of the women in the study shared how their friendship circles had changed and, in some cases, entirely broken down once they learnt that they were pregnant. This often was due to the mothers finding they were at a different point in their lives to their friends, which meant they often felt that they no longer fitted in with their friendship circles. All of the women went on to develop new friendships with other mothers, which they seemingly felt were easier to maintain given the similarities in their lifestyles. The weakening of their ties to their previous friendships is arguably a consequence of the ongoing deterritorialisation process that a mother experiences as she becomes a mother and detaches from her previous life to make way for her new one.

Most of the women discussed their mothers at some point during their interviews and how their relationship with them had changed, and often improved, after they themselves became mothers. Charlotte explaining that she had a newfound respect for her mother:

I could relate to her experiences because I was now a Mam as well which helped us improve our relationship. I wouldn't say we were equals, I just don't feel that. I look up to her so much, because she had a much harder time because she was bringing us up on her own and I've got so much respect for that.

Prior to her pregnancy, Faye's relationship with her own mother had been turbulent; however, like Charlotte, Faye shared how this had changed since becoming a mother herself:

Over the first few years things definitely changed. I found my footing as a mum and I think she respected me for that. She was a good Grandma as well and wanted to be around a lot. We've ended up being so much closer since I've become a mum myself ... we relate to each other better.

Becoming a mother predominantly appeared to give the women a deeper connection with their own mother as they were able to empathise and relate to each other's experiences. This improved bond could be attributed to the fact that the women's sense of self and identity was beginning to reterritorialize, with her developing stronger links and ties to the culture of motherhood where she previously had none.

### *Getting Comfortable with the Baby*

Throughout the interviews, all the women expressed varying levels of initial feelings of discomfort and self-doubt as their pregnancy progressed and following the birth of their child. These feelings seemed to stem from their insecurities surrounding their ability to conduct the physical practices of mothering. The women predominantly seemed to take at least several weeks to begin to settle into their role as a mother. Charlotte told of how she relied on her partner to care for her baby in the first month as he had children from a previous relationship and, therefore, in her eyes was more capable of caring for the baby than she was:

I don't think I did it on my own for quite a while because I was so frightened I was going to break it... I mean break him. A lot of stuff, first nappies, feeds and stuff were done by my partner I obviously did do some of it, but I constantly went to him for reassurance knowing that he had done it before.

As time went on, Charlotte became more confident in her ability to care for her baby and began to rely less on her partner for guidance and reassurance. Like Charlotte, all the mothers interviewed explained that it took them some time to feel comfortable and confident in their own mothering abilities. Jessica described in detail having a differing experience bonding with each of her three children. Lucy described the bonding experiences with her two children as confusing, as she struggled with not developing that commonly described instant bond with her first son:

It wasn't the second day that I was in hospital when all the visitors had left that I felt it. The nurse put him on my chest for some skin to skin bonding time and I looked at him and he just looked right back into my eyes and all of a sudden, I just thought there was no way I could ever love anything so much.

Despite her concerns, Lucy did well to adapt to motherhood in the following months despite having little support from her partner at the time. Her growing belief in her competencies and capabilities of mothering as time passed and her baby grew seemed to be what enabled her to bond so effortlessly with her second child:

I felt the bond with my second straight away because I had done it myself. I knew how it felt and I knew that we would be okay together. I'd done it before and had done a decent job, so I didn't doubt myself this time and wasn't scared of him.

Lucy's belief in her own capabilities as a mother was underpinned by her own perceived success when it came to raising and caring for her first. These perceptions of previous success nurtured a sense of self-belief in herself and helped eradicate the feelings of fear and self-doubt she experienced with her first which ultimately enabled the experience of becoming a mother for the second time to be more enjoyable one.

Jessica spoke of 'over bonding' with her third child and first daughter to the extent that she experienced separation anxiety and difficulties having others interacting with and holding her baby. She experienced extensive difficulties when it came to processing each of the differing bonding experiences, and the guilt she felt over the differing intensities in her bond with each of her children.

Practically all the mothers discussed their bond with their baby during their interviews, with many of them sharing that they did not experience the 'instant bond' that they expected too. This is evident in Charlotte's referral in the prior quote to her baby as 'it' before immediately correcting herself. She persistently referred to her baby as 'it' during her interview until she began to talk of building a bond with him. For some women not having this instant bond was difficult to process as they had been essentially conditioned to believe that they would have an instant attachment to their baby once it arrived. As they began to feel more comfortable caring for their child, they became more comfortable with their role as a mother, with their identity beginning to stabilise as a result of this comfort and confidence.

### *Rediscovering the Self*

A common theme which emerged within the women's narratives was that they often felt lost in the initial stages of motherhood. This is not a surprising revelation

given that their lives changed beyond recognition following the arrival of their child. Several of the mothers discussed feeling lost once their baby arrived as they no longer engaged in activities for their selves, instead focussing everything they did around their child. Claire described how she felt a loss of who she was since becoming a mother:

I feel like since I have had children, I've lost who I am because now I am on the school run I am just known as Jake or Daniel's mam. You don't really have an identity anymore. If someone wants to speak to you, you're just referred to as so and so's mam.

Several of the mothers reported instances where they felt disembodied from who they were as an individual, with them describing experiencing those around them such as family, friends and other mothers persistently reducing them down to simply their role as a mother as Claire describes above. This reduction of the self to one singular aspect, or component, was constrictive for mothers and contributed to their feelings that they had lost their 'self' to being a mother.

Lucy described how her everyday life routines had changed following the arrival of her baby:

I just hadn't done anything for me since becoming a mam. Everything always revolved around the baby and doing things for him.

Becoming a mother meant that the women's central focus changed as they had the responsibility of caring for their child, something which monopolised their time extensively in the early stages of motherhood when they were still in the process of transitioning into their role and adapting to their new identity. The majority of mothers seemed to take time to settle into their new role as a mother, with them sharing that the initial few months were difficult for them as they were unsure how to care for their baby. Kate shared how up until the point that her child was around eight months old she was largely guessing at what she should be doing:

The first seven or eight month of his life was just a blur, I was just totally lost. I didn't know what I was doing with my life and I didn't know how to be a mam so I was just kind of wandering through it all guessing at what I should be doing.

Kate demonstrates how over the course of seven to eight months, she began to become more confident in her ability to parent and make decisions relating to her child and his needs. Most of the mothers interviewed described a gradual process of adjustment to their new role as a mother. Once the women began to feel more comfortable in their new role as a mother, they began to feel more confident and competent in their abilities to raise their child and care for them independently:

I feel like I just couldn't bond with her because everyone else was looking after her for me. I think that I sort of lost myself at that point to be honest. I was so tired all the time and I was just consumed with guilt. Once I started to bond with her and was doing the things she needed I started to feel so much better though. Joanne

Becoming more comfortable with their mothering abilities helped the women take a step towards feeling more competent which, in turn, helped them identify themselves more readily with the mother identity. This comfort enables the women

to begin to stabilise their identity and sense of self, as they begin to develop ties to their new identity. As their sense of self begins to stabilise and reterritorialize, the women are able to bring more balance to their identity by beginning to reconcile their feelings of guilt and incompetency which helped them feel more able to engage in activities which focussed around their self again – such as going to the gym or out with friends. The arrival of a baby throws a new mother's life into chaos, changing it beyond recognition and causing her to lose herself. As she re-orientates herself in her life and begins to become comfortable and establish a balance between being a mother and her own person her identity begins to reterritorialize and she is able to rediscover and ultimately reconstruct her 'self' so that it incorporates her multiple roles in life.

### *Constructing the Mother as an Assemblage*

Persons are not typically considered the smallest analytical unit studied by social scientists, though in terms of assemblage theory, they are the smallest scale social assemblage considered by DeLanda in his book *A New Philosophy of Society: Assemblage Theory and Social Complexity*. Despite this, it can be fairly theorised that persons emerge from the interaction of sub-personal components and can therefore still be conceptualised as an assemblage. It is important to acknowledge that when conceptualising persons as assemblages the end goal cannot be to settle all questions concerning subjectivity or consciousness as this is practically impossible. The goal instead must be to formulate a plausible model in which 'the subject emerges as relations of exteriority are established among the contents of experience' (DeLanda, 2006a, p. 47).

Assemblage theory dictates that an assemblage is a whole made up of heterogeneous parts, or components, which continuously interact with one another. The continuous interaction between the components is what produces the emergent properties of an assemblage and makes a whole both fluid and multifaceted. It is possible to frame a wide variety of social wholes as assemblages, from large cities right down to the individual. The individual as an assemblage comprises of a range of sub-personal components which interact with one another to form the whole person. These components are often attributes such as 'impressions, ideas, propositional attitudes habits [and] skills' (DeLanda, 2006a, p. 52). An individual's personal identity is one of these many subcomponents, which it in itself also made up of a range of components that stem from their roles in the home, workplace, their social circle and their daily habits and routines. It is from the complex interactions between these components that the 'whole' person, or the assemblage, emerges. It is the capacity for these components to continually interact which allows for the assemblage to develop emergent properties, as without these interactions the components would essentially fuse together as one singular totality, or in other words, would become a whole irreducible to its parts.

As an assemblage, a person's identity is one of the many components that continually interacts to form the person as a whole. The components of an assemblage engage in relations of exteriority, meaning that it is possible for each component to be 'unplugged' from the assemblage and 'plugged' into another where

its interactions will differ. The removal of a component from an assemblage also does not prevent the assemblage from functioning as the interactions between the other components continue. The fluid and ephemeral nature of an assemblage means that these components often work to stabilise the assemblage's identity, or conversely, to change it, or transform it into an entirely new assemblage. These components have either material or expressive roles, with the material aspects of components being the physical body of the individual, the time and energy dedicated to their daily routines, etc. and the expressive aspects being their use of both linguistics and non-linguistics.

Applying this mode of thinking to a woman and her transition into motherhood, the woman herself is the whole, the assemblage, and her personal identity is a component within the assemblage. Her multiple roles in life form some of the sub-components of her personal identity, with their interactions enabling her identity to emerge as a whole. When she becomes a mother, she gains a new identity, as a new component is 'plugged' into the assemblage, with her role as a mother being a sub-component of her personal identity, which is a component within the assemblage itself. Introducing new components often produces new processes and interactions between the parts which can destabilise the assemblage. The data showed that when becoming a mother, a women's daily routine and behaviours changed dramatically due to being unable to continue their social lives, for example, which weakened and blurred the spatial boundaries of the assemblage. The main process of territorialisation, which stabilises the assemblage, is habitual repetition where habitual and routine associations are maintained. The blurring of the boundaries of the assemblage following the introduction of the 'mother component' causes the assemblage to lose its stability however, which can deterritorialise a woman's personal identity. Deterritorialisation processes are multiple: sensory deprivation, madness, intoxication, disruptions to daily routines and when occurring will often cause a loss, or severe destabilisation, of the assemblages subject identity (DeLanda, 2006a, p. 50).

All the women interviewed discussed to some level experiencing feelings of loss, often of the self, following becoming a mother and took time to become comfortable with their new role in life. These feelings of having lost their 'self' coincide with the points where the assemblage became unstable and was deterritorialising as the life they were accustomed too began to change. It is possible for personal identity to be deterritorialised by not only a loss of stability, but also by an augmentation of capacities, or in other words, by acquiring new skills. Once a mother gives birth to her child, she begins to conduct the physical practices of mother – feeding, changing and generally caring for her baby – which sees her learning new skills, developing new impressions and engaging in new experiences and routines. These new skills and routines are deterritorialising in the sense that they allow the mother to break with past routines by engaging in new ones centred on their baby. Over time, these skills become routine which enable the assemblage to re-stabilise and reterritorialize as the woman becomes competent in her new role as a mother. Once the physical acts of mothering have become routine, it becomes possible for a woman to incorporate her identity as a mother into her personal identity as a whole once she has transitioned into motherhood. Across

motherhood, mothers will continually deconstruct and reconstruct their identity, as their child develops and progresses through the various life stages, as different demands and changes will take place in their lives which will provoke different interactions between components within the assemblage.

It is the fluid and ephemeral nature of an assemblage and assemblage theory itself which allows for such thinking to be used to conceptualise identity formation and transitions. Conceptualising a woman as an assemblage enables researchers to conduct an in-depth exploration of the intricate processes at play as she transitions into motherhood. The fact that assemblage theory is premised on emergence and fluidity places it well for explaining how a woman's identity and sense of self become destabilised once she discovers she is pregnant. As she progresses through her pregnancy the assemblage continues to be unstable as components are added and/or removed throughout this transition as her day-to-day lived experiences adapt to accommodate her new role as a mother. The interactions between components, while continuous, can change throughout this transition, particularly at the point where she begins to acquire new skills once her baby arrives. The lack of stability within the assemblage as a woman ventures into the unknown territory of motherhood is what spurs emotional responses such as fear, guilt and self-doubt, and it is not until these emotional responses are reconciled and these new skills become routine that the mother is able to formulate a stable sense of self and personal identity. Every person lives an 'original existence', and therefore, every woman's transition into motherhood is one which is unique and varied as each person, or assemblage, is unique and comprises different components which interact differently. It is through the processes of deterritorialisation, augmentation of capacities and (re)territorialisation that a mother is able to deconstruct her previous identity and reformulate it across her transition into motherhood to incorporate her new role as a mother into her personal identity as a whole. These processes are continuous, with the identity of the woman, incorporating her role as a mother, emerging gradually once the assemblage begins to stabilise and territorialise. The fluid and contingent nature of an assemblage positions it well to inform understandings of how a woman's identity is reflexive and adaptive, with these characteristics enabling it to be endlessly reconstructed across the individual's life course. While the women's identity and assemblage does come to stabilise as the mothers develop a strong sense of self and identity, this identity never comes to be an organic totality or fixed whole due to these fluid characteristics. Given that the ongoing nature of motherhood incorporates numerous transitional stages which ultimately make it an ongoing process using an assemblage framework to conceptualise identity is vital if one is to accurately convey the fluid, contingent and ephemeral nature of identity across the life course.

While the initial transition into motherhood is a major life event, the transition itself is not a linear one with a clear end point. Instead, it is better conceptualised as an endless process with differing key stages embedded within it. The primary event of becoming a mother certainly commands an extensive reformulation of a woman's sense of self and identity, but given that motherhood is an ongoing transition, these reformulations are not merely limited to the initial entry

into motherhood. As their baby grows and begins to walk and talk, they enter a new stage of motherhood which requires a different approach to parenting. These periods of adaption will again prompt deterritorialisation and reterritorialisation to take place as they learn to adapt to their ever-changing role, reconstructing their assemblage in the process. This will happen continually across motherhood as children transition from being toddlers through to being teenagers and ultimately independent adults, with each of these stages of childhood presenting new periods of adjustment. Conceptualising the individual and their identity as an assemblage is, therefore, a well-placed approach for helping to both develop and deepen understandings of how an individual's identity and sense of self can be reformulated in response to changes in the everyday life.

## CONCLUSION

This study was designed to explore the subjective, lived experiences of women as they transitioned into motherhood using assemblage theory to conceptualise the reformulation of identity that occurs as part of that transition. Assemblage theory was a valuable and innovative method for conceptualising how the woman herself was an assemblage, which comprises a range of components and parts that interact to form her identity and overall sense of self as a whole. The themes identified in the initial analysis of the transcripts were useful in underpinning the conceptualisation of the mother as an assemblage as they identified distinct points in the transition into motherhood where deterritorialisation and reterritorialisation processes would occur. As all the components of an assemblage are made up of other sub-components, the mother identity was conceptualised as being a sub-component of the woman's personal identity. The continuous interactions between these components could destabilise the assemblage and at times transform it into a new one entirely, with these interactions being the points where the women's identities were reformulated and would be to transform and emerge. The concepts of deterritorialisation and territorialisation were useful in understanding how expectant mothers, and later new mothers, deconstructed and then reconstructed their personal identity during their transition into motherhood. It was through these deterritorialisation processes – such as disturbed routines, emotional turmoil etc. – that the assemblage would come to destabilise. The period in between the assemblage re-stabilising and reterritorializing was the point at which the women reconstructed their personal identity as they began to settle into the role as a mother and became more confident. A woman's augmentation of capacities would strengthen during this period also, as it is during this time that the women acquired new skills through their mothering practices. It is not until using these skills became habitual and routine that the assemblage re-stabilised as the mother is then stable enough to reconstruct her personal identity to incorporate her new role as a mother.

A key finding from the study was that all of the women experienced extensive emotional turmoil upon discovering their pregnancy regardless of whether their pregnancy was planned or not. This emotional turmoil would lead to a

destabilisation, or deterritorialisation, of the mother's identity as she becomes aware that she is carrying a child which will force her to adapt her everyday life. This finding resonated with that of previous research which found that transitioning into motherhood prompts an emotional crisis (Figs, 2008; Freund, 2008; Read et al., 2012) as new mothers struggle to process the range of often conflicting emotions they experience as their pregnancy progresses and following the birth of their child. The study found quite extensive evidence that emotions had a focal role in how the women made sense of the experiences of motherhood. They tended to experience more tempestuous, negative emotions at points where their identity, or assemblage, was becoming destabilised and the more positive emotions when their identity began to stabilise again. These emotional repercussions were driven by their insecurities and a changing sense of self and therefore only resolved once the women became comfortable with their role and the routines in their everyday life as a mother. A further key finding emerged concerning the reconstruction of relationships which took place for all of the women as each of them articulated how substantial changes to the relationships they held with those around them took place across their pregnancy and upon entering motherhood. More than half of the women interviewed experienced relationship breakdown with their spouse either during pregnancy or once their baby arrived with this relationship break down often being attributable to the women's perceived failure of the fathers to adapt to parenthood as they themselves did. More than half of the women did describe improved relationships with their own mothers however, as they felt becoming a parent themselves gave them a deeper connection and understanding of why their mothers made many of the choices they did. The study found clear, inextricable links between the women getting comfortable with their baby, and their subsequent rediscovery of the self with many women being able to rediscover who they were as an individual in addition to being a mother once they were settled into the role and routines of motherhood. The difficulties of transitioning into motherhood were often reconciled upon the women rediscovering the self which stabilised their identity, or assemblage.

The study design was somewhat limited in terms of diversity as all of the sample were white, heterosexual women aged 35 or under. While the research was successful in exploring the experiences of these women with the findings still having the potential to be widely applicable to a woman's experience of motherhood it is recommended that future research incorporates a more diverse sample group. A further recommendation would be to explore in more depth the experiences of women who were in the later stages of motherhood, where their children had left home for instances as none of the sample had reached this point of motherhood. It must be noted however that while the findings may not have explored these later stages of motherhood, the research certainly highlights the opportunity and potential significance of future research in exploring women's experiences of later motherhood. All of the women described reoccurring periods of deterritorialisation and reterritorialisation as they reached and adapted to different stages of motherhood therefore follow up research with the participants could be deeply

beneficial in developing a more nuanced, in-depth understanding of the reiterative nature of the formulation of an identity assemblage.

The results and concepts developed within this study cast an analytical spotlight on the ways in which we come to understand identity and its formation. Such understandings further illuminate how findings from previous research concerning emotions and attaining a new identity (Ambrosini & Stanghellini, 2012; Miller, 2007; Figs, 2008; Read et al., 2012) can be intrinsically linked to the formation of a woman's identity and her overall self as an assemblage. This study demonstrates not only the suitability and worthiness of assemblage theory in relation to identity formulation but also highlights the potential for future research to build upon and further these concepts. Such a theoretical approach could be used to explore a diverse range of identity transitions such as moving from childhood to adolescence or being an offender to being a non-offender for example. Assemblage theory holds the potential to be of significant use across a range of sociological research areas relating to identity formulation, with such studies having the potential to truly broaden the scope of sociological understandings of identity formation.

## REFERENCES

- Ambrosini, A., & Stanghellini, G. (2012). Myths of motherhood: The role of culture in the development of postpartum depression. *Annali dell'Istituto Superiore di Sanità*, 48(3), 277–286. doi:10.4415/Ann\_12\_03\_08.
- Arnold-Baker, C. (2014). *How becoming a mother involves a confrontation with existence: An existential-phenomenological exploration of the experience of early motherhood*. Middlesex University. Retrieved from <http://eprints.mdx.ac.uk/18278/1/CArnoldBakerThesis>
- Bacevic, J. (2019). With or without U? Assemblage theory and (de)territorialising the university. *Globalisation, Societies and Education*, 17(1), 78–91. <https://doi.org/10.1080/14767724.2018.1498323>
- Badinter, E. (1981) *Mother love: myth and reality: Motherhood in modern history*. London: Macmillan.
- Badinter, E. (2011) *The conflict: How modern motherhood undermines the status of women*. New York, NY: Metropolitan Books.
- Barbosa, M. A. M., Chaud, M. N., & Gomes, M. M. F. (2008). Experiences of mothers of disabled children: A phenomenological study. *Acta Paulista de Enfermagem*, 21(1), 46–5246.
- Brockington, I. (1996). *Motherhood and mental health*. Oxford: Oxford University Press.
- Bryman, A. (2012). *Social research methods* (3rd ed.). Oxford: Oxford University Press.
- Campbell, E. (2013). Public sphere as assemblage: The cultural politics of roadside memorialization. *British Journal of Sociology*, 64(3), 526–547. doi:10.1111/1468-4446.12030
- Choi, P., Henshaw, C., Baker, S., & Tree, J. (2005). Supermum, superwife, supereverything: performing femininity in the transition to motherhood. *Journal of Reproductive and Infant Psychology*, 23(2), 167–180. doi:10.1080/02646830500129487
- DeLanda, M. (2002). *Intensive science and virtual philosophy, philosophy*. Bloomsbury: London.
- DeLanda, M. (2006a). *A new philosophy of society*. London: Continuum.
- DeLanda, M. (2006b). Deleuzian social ontology and assemblage theory. In M. Fuglsang & B. M. Sørensen (Eds.), *Deleuze and the social* (pp. 250–266). Edinburgh: Edinburgh University Press.
- Deleuze, G., & F. Guattari. (1987). *A thousand plateaus: Capitalism and schizophrenia*. London: Continuum.
- Fenge, L. A., & Jones, K. (2012). Gay and pleasant land? Exploring sexuality, ageing and rurality in a multi-method, performative project. *British Journal of Social Work*, 42(2), 300–317. doi:10.1093/bjsw/bcr058
- Figs, K. (2008). *Life after birth*. London: Virago.

- Freund, A. (2008). *Expectations and experiences of first-time mothers*. Indiana University. Retrieved from [https://scholarworks.iupui.edu/bitstream/handle/1805/1669/Thesis\\_Expectations\\_and\\_Experiences\\_of\\_First-Time\\_Mothers\\_Andrea\\_Freund.pdf?sequence=2](https://scholarworks.iupui.edu/bitstream/handle/1805/1669/Thesis_Expectations_and_Experiences_of_First-Time_Mothers_Andrea_Freund.pdf?sequence=2)
- Hannan, J. (2015). *Older mothers' experiences of postnatal depression. An interpretative phenomenological analysis*. Middlesex University. Retrieved from <http://eprints.mdx.ac.uk/17416/1/JHannanThesis.pdf>
- Hollway, W. (2015). *Knowing mothers*. Basingstoke: Palgrave Macmillan.
- Hollway, W. (2016). Feminism, psychology and becoming a mother. *Feminism & Psychology*, 26(2), 137–152. doi:10.1177/0959353515625662
- Homewood, E., Tweed, A., Cree, M., & Crossley, J. (2009). Becoming occluded: The transition to motherhood of women with postnatal depression. *Qualitative Research in Psychology*, 6(4), 313–329. doi:10.1080/14780880802473860
- Kleiman, K. (2011). Motherhood and loss? *Psychology Today*. Retrieved from <https://www.psychologytoday.com/blog/isnt-what-i-expected/201104/motherhood-and-loss>
- Laney, E. K., Carruthers, L., Hall, E., & Anderson, T. (2014). Expanding the self: Motherhood and identity development in faculty women. *Journal of Family Issues*, 35(9), 1227–1251. doi:10.1177/0192513X13479573
- Latour, B. (1993). *We have never been modern, philosophy of science*. Cambridge, MA: Harvard University Press.
- Lazarus, K., & Rossouw, P. (2015). Mother's expectations of parenthood: The impact of pre-natal expectations on self-esteem, depression, anxiety, and stress post birth. *International Journal of Neuropsychotherapy*, 3(2), 102–123. doi:10.12744/ijnpt.2015.0102-0123
- Marcus, G. E., & Saka, E. (2006). Assemblage. *Theory, Culture & Society*, 23(2–3), 101–106. doi:10.1177/0263276406062573
- Maushart, S. (1999). *The mask of motherhood: How becoming a mother changes everything and why we pretend it doesn't*. London: Pandora.
- McFarlane, C. (2009). Translocal assemblages: Space, power and social movements. *Geoforum*, 40(4), 561–567.
- Mercer, R. T. (2004). Becoming a mother versus maternal role attainment. *Journal of Nursing Scholarship*, 36(3), 226–232. doi:10.1111/j.1547-5069.2004.04042.x
- Miller, T. (2007). “Is this what motherhood is all about?” Weaving experiences and discourse through transition to first-time motherhood. *Gender and Society*, 21(3), 337–358. doi:10.1177/0891243207300561
- Muminovic, M. (2015). Places as assemblages: Paradigm shift or fashionable nonsense? *Athens Journal of Architecture*, 1, 295–309. doi:10.30958/aja.1-4-3
- Muylaert, C. J., Sarubbi, V., Gallo, P. R., & Neto, M. L. (2014). Narrative interviews: An important resource in qualitative research Narrative interviews: an important resource in qualitative research Narrative interviews: an important resource in qualitative research. *Rev Esc Enferm USP*, 48(Esp2), 184–189. doi:10.1590/s0080-623420140000800027
- Nail, T. (2017). What is an assemblage? *SubStance*, 46(1), 21–37. Retrieved from <https://muse.jhu.edu/article/650026>. Accessed on March 15, 2019.
- Oakley, A. (1980). *Becoming a mother*. New York, NY: Schocken Books.
- Oakley, A. (1987). *Housewife: High value – Low cost*. London: Penguin.
- Pandit, N. R. (1996). The creation of theory: A recent application of the grounded theory method. *The Qualitative Report*, 2(24), 1–15. Retrieved from <http://nsuworks.nova.edu/tqr>
- Price, J. (1988). *Motherhood: What it does to your mind*. London: Pandora.
- Puar, J. K. (2012) “I would rather be a cyborg than a goddess”: Becoming-Intersectional in Assemblage Theory. *philoSOPHIA*, 2(1), 49–66.
- Read, D. M. Y., Crockett, J., & Mason, R. (2012). “It was a horrible shock”: The experience of motherhood and women's family size preferences. *Women's Studies International Forum*, 35(1), 12–21. doi:10.1016/j.wsif.2011.10.001
- Rumbold, A. R., & Crowther, C. A. (2002). Women's experiences of being screened for gestational diabetes mellitus. *The Australian and New Zealand Journal of Obstetrics and Gynaecology*, 42(2), 131–137. doi:10.1111/j.0004-8666.2002.00131.x
- Ryan, S., & Runswick-Cole, K. (2008). Repositioning mothers: mothers, disabled children and disability studies. *Disability & Society*, 23(3), 199–210. doi:10.1080/09687590801953937

- Stadlen, N. (2004). *What mothers do: Especially when it looks like nothing*. London: Piatkus.
- Stern, D. N. (1998). *The motherhood constellation: A unified view of parent-infant psychotherapy*. London: Karnac Books.
- Stern, D. N., Bruschweiler-Stern, N., & Freeland, A. (1998). *The birth of a mother: How the motherhood experience changes you forever*. New York, NY: BasicBooks.
- Urwin, C. (2007). Doing infant observation differently? Researching the formation of mothering identities in an inner London borough. *International Journal of Infant Observation and Its Applications*, *10*(3), 239–251. doi:10.1080/13698030701706753
- Viorst, J. (1998). *Necessary losses*. New York, NY: Fireside.

